

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

PLAINTIFF <i>Darryl L. Fitchugh</i>	<b>RECEIVED</b> <b>AUG 30 2024</b>	COURT CASE NUMBER <i>CIU-24-845 JI</i>
DEFENDANT <i>Microsoft Corporation</i>		TYPE OF PROCESS
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>Microsoft Corporation</i>		
SERVE AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <i>Microsoft Building 92, WES 36th Redmond, WA 98052</i>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW <i>3819 W. Geraldine ave. Apt 31 Oklahoma City, OK 73112</i>		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):		

Signature of Attorney other Originator requesting service on behalf of <input type="radio"/> PLAINTIFF <input type="radio"/> DEFENDANT	TELEPHONE NUMBER	DATE
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE		
I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <i>4</i>	District of Origin No. <i>64</i>
	District to Serve No. <i>86</i>	Signature of Authorized USMS Deputy or Clerk <i>MJ8</i>
		Date <i>9/9/24</i>
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below		
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)		
Name and title of individual served (if not shown above) <i>Hesseltine, Mr. (Security)</i>	Date <i>9/12/24</i>	Time <i>1:30</i>
Address (complete only different than shown above) <i>///</i>	Signature of U.S. Marshal or Deputy <i>[Signature]</i>	
Service Fee <i>130.00</i>	Total Mileage Charges (including endeavors) <i>24 miles</i>	Forwarding Fee <i>8.00</i>
	Total Charges	Advance Deposits
		Amount owed to U.S. Marshal* or (Amount of Refund*)

REMARKS

*1. 2 Deputy, 24 miles total, served at location, 1 hour*

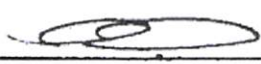

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

PLAINTIFF	<u>Darryl L Fitzhugh</u>	RECEIVED	COURT CASE NUMBER <u>CIU-24 845 TO</u>
DEFENDANT	<u>Meta Platforms, INC</u>	AUG 30 2024	TYPE OF PROCESS
U.S. MARSHALS WORK			
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Meta Platforms, INC</u>		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>1 Hacker Way Menlo Park, CA 94025</u>		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			Number of process to be served with this Form 285
<u>3819 N. Geraldine ave apt 31</u> <u>OKLAHOMA CITY, OK 73112</u>			Number of parties to be served in this case
			Check for service on U.S.A.
			SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:	<input type="radio"/> PLAINTIFF <input type="radio"/> DEFENDANT	TELEPHONE NUMBER	DATE
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>4</u>	District of Origin No. <u>64</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk 	Date <u>10/10/24</u>
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above) <u>EDGAR centeno - security lead</u>				Date <u>10/10/24</u>	Time <u>1115</u> <input checked="" type="radio"/> am <input type="radio"/> pm
Address (complete only different than shown above) <u>18 HACKER WAY</u> <u>MENLO PARK, CA 94025</u>				Signature of U.S. Marshal or Deputy 	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)

REMARKS

# of DUSMs: 1

# of hours for all DUSMs: 1.5

# of round trip miles for all vehicles: 60



PLAINTIFF <u>Darryl L. Fitzhugh</u>		COURT CASE NUMBER <u>CIU-24 895 JD</u>	
DEFENDANT <u>Google Trust services LLC</u>		TYPE OF PROCESS .	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Google Trust services LLC</u>			
SERVE AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>1600 Ambitacarte parkway Mountain View, CA 94043</u>			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW <u>3819 W. Geraldine ave. apt 31</u> <u>Oklahoma city, OK 73105</u>		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):			
Signature of Attorney other Originator requesting service on behalf of: <input type="radio"/> PLAINTIFF <input type="radio"/> DEFENDANT		TELEPHONE NUMBER	DATE
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>4</u>	District of Origin No. <u>64</u>	District to Serve No. <u>64</u>
Signature of Authorized USMS Deputy or Clerk <u>TW</u>		Date <u>10/15/24</u>	
I hereby certify and return that I <input type="checkbox"/> have personally served, <input checked="" type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.			
<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)			
Name and title of individual served (if not shown above) <u>Front Desk</u>		Date <u>10/07/24</u>	Time <u>10:59</u> <input checked="" type="radio"/> am <input type="radio"/> pm
Address (complete only different than shown above)		Signature of U.S. Marshal or Deputy	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges
Advance Deposits		Amount owed to U.S. Marshal* or (Amount of Refund*)	

REMARKS

Summons sent certified mail. Tracking number:  
9589 0710 5270 2454 8279 64.